

Application Form For Vacancy of Elected Office

NAME: _____
First Middle Initial Last

Residential Address:

Street (If you use a PO Box include it also) City

Contract Information:

Phone number: _____

Cell Phone number: _____

Email Address: _____

Office that is vacant and applying for: _____

Occupation (If retired list occupation prior to retirement)

List organizations that you are currently associated with; Boards that you sit on or have sat on; Volunteer experiences; Special skills:

List (3) individuals (other than a relative or past employers) **who have knowledge of your skills and/or character:**

NAME

Phone/Cell Number

FOR OFFICE USE ONLY:

REGISTER VOTER ____ YES ____ NO

VOTING PRECINCT _____

PARTY AFFILIATION _____